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CONFIRMATION NO. 7599

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|--|---|---------------------------|------------------------|---|----------------------------|
| SERIAL NUMBER 10/627,265 | FILING DATE 07/26/2003 RULE | CLASS 433 | GROUP ART UNIT 3732 | ATTORNEY DOCKET NO. | |
| APPLICANTS Neal B. Gittleman, Houston, TX; ** CONTINUING DATA <i>None CED</i> ** FOREIGN APPLICATIONS <i>None CED</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 10/21/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>CED</i> Examiner's Signature <i>CED</i> Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 5 | TOTAL CLAIMS 16 | INDEPENDENT CLAIMS 2 |
| ADDRESS Ezra L. Schacht 1620 West Main St. Houston, TX 77006-4712 | | | | | |
| TITLE Dental minipin with interchangeable abutments | | | | | |
| FILING FEE RECEIVED 375 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |